

(FILE 'HOME' ENTERED AT 17:28:11 ON 13 DEC 2002)

FILE 'BIOSIS, MEDLINE, INPADOC, CAPLUS' ENTERED AT 17:28:29 ON 13 DEC 2002

L1 62821 HCG OR (CHORIONIC GONADOTROPIN)
L2 361 L1 AND DIABETES
L3 10 L2 AND (TH1 OR TH2)
L4 20 L1 AND (TREAT?(5A)DIABETES)
L5 18 L4 NOT L3
L6 14 DUPLICATE REMOVE L5 (4 DUPLICATES REMOVED)
L7 31 L1 AND (TH1 OR TH2)
L8 29 L7 NOT L4
L9 21 L7 NOT L3
L10 13 DUPLICATE REMOVE L9 (8 DUPLICATES REMOVED)
L11 41 L1 AND IMMUNOREGUL?
L12 26 DUPLICATE REMOVE L11 (15 DUPLICATES REMOVED)

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L12 ANSWER 26 OF 26 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.DUPLICATE
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 AN 1977:198510 BIOSIS
 DN BA64:20874
 TI IMMUNO REGULATORY PROPERTIES OF FRACTIONS FROM HUMAN PREGNANCY URINE
 EVIDENCE THAT HUMAN CHORIONIC GONADOTROPIN IS NOT
 RESPONSIBLE.
 AU MUCHMORE A V; BLAESE R M
 SO J IMMUNOL, (1977) 118 (3), 881-886.
 CODEN: JOIMA3. ISSN: 0022-1767.
 FS BA; OLD
 LA Unavailable
 AB The immunologically privileged position of the histoincompatible fetus and
 placenta is a striking example of a physiologic **immunoregulatory**
 mechanism. This study was designed to examine the effects of human
chorionic gonadotropin (HCG) on the
 recognitive proliferative phase and the cytotoxic effector phase of in
 vitro cell-mediated immune responsiveness. Commercial preparations of
HCG were potent inhibitors of lymphocyte proliferative responses
 to nonspecific mitogens like phytohemagglutinin (PHA), specific antigens
 such as streptolysin-O (SLO) and allogeneic cells as measured in the 1-way
 mixed leukocyte response. Cytotoxic effector function of lymphocytes as
 measured by antibody-dependent cellular cytotoxicity (ADCC) and
 mitogen-induced cellular cytotoxicity were markedly inhibited by these
 preparations. The 50% inhibitory concentration varied widely from lot to
 lot of these commercial materials. After dialysis a portion of the
 inhibitory activity was lost from some but not all **HCG** lots. The
 dialysate from those lots with diminished activity was immunosuppressive
 in vitro but contained no **HCG** detectable by radioimmunoassay.
 Following dialysis the immunosuppressive activity of the various
HCG lots remained variable and correlated poorly with values for
HCG obtained by a double antibody radioimmunoassay. **HCG**
 preparations purified to a homogeneity sufficient for amino acid sequence
 were only minimally immunosuppressive to the in vitro PHA response, and
 had almost no effect on proliferative responses to antigens and allogeneic
 cells. **HCG** apparently does not have a primary
immunoregulatory role. Other uncharacterized compounds partially
 co-purified from pregnant urine along with **HCG** may have such
immunoregulatory activity. Further characterization and
 identification of this **immunoregulatory** material(s) is
 essential, since it appears to have many of the properties of an ideal
 immunosuppressive compound: nontoxicity; ready reversibility; activity at
 very low concentration; and activity on a broad range of cellular immune
 functions.

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